

**POSSESSORY INTEREST LEASE REPORT**Use one form per tenant (*State Assessee*). Please provide a copy of any new lease agreement/amendment.**A. AGENCY INFORMATION**

REPORTABLE INTEREST

☐ Yes ☐ No

REPORTING AGENCY

CONTACT NAME

ADDRESS (*street, city, state, zip code*)

TELEPHONE NUMBER

FAX NUMBER

EMAIL ADDRESS

DATE

**B. POSSESSORY INTEREST PROPERTY INFORMATION**PROPERTY ADDRESS (*street, city, state, zip code*)

COUNTY

BASE RENT (*enter dollar amount and check one*)\$ ☐ Monthly ☐ Semiannually ☐ Annually

RENT INCREASES

☐ Yes ☐ No

DATE

AMOUNT

\$

ANNUAL OPERATING EXPENSES TO LANDLORD (*enter amounts below*)

MANAGEMENT

INSURANCE

MAINTENANCE

\$

\$

\$

UTILITIES

OTHER

\$

\$

ARE THE IMPROVEMENTS OWNED BY THE TENANT?

☐ Yes ☐ No

IMPROVEMENT DESCRIPTION

IMPROVEMENT COST

PAID BY

\$

☐ Landlord ☐ Tenant

IMPROVEMENTS TO REVERT BACK TO THE LANDLORD AT THE END OF THE LEASE

☐ Yes ☐ No

COMMENTS

**Please return the completed form to:**State Board of Equalization  
State-Assessed Properties Division  
PO Box 942879  
Sacramento, CA 94279-0061**If you have any questions please contact the  
State-Assessed Properties Division at:**Telephone (916) 274-3270  
Fax: (916) 274-0132